

Before completing **Protecting God’s Children** training online, all participants **must** first register with **VIRTUS Online**.

NOTE: if you previously had an account with **Virtus**, **please do not go any further and email coconnor@dioceseaj.org** to get your old account reactivated.

For new users to Virtus---- please click on the VIRTUS link to access the VIRTUS Registration page:

https://www.virtusonline.org/virtus/reg_2.cfm?theme=0&org=37531



Create a user ID and a password you can easily remember.

This is necessary for all participants. This establishes your account with the VIRTUS program.

If your preferred user ID is already taken, please choose another ID. We suggest the use of email addresses as user names.

Click **Continue** to proceed.



Please create a user id and password that you will use to access your account.

Common names like Mary and John are not good choices as they are most likely already in use. Common abbreviations like 'smith' and 'moran' are also likely to already be in use. We suggest using your full name (without spaces) or email address as they are more likely to be unique.

Create a User ID:

Create a Password:

Your user id is case sensitive. We recommend that you use all lower case letters and avoid spaces and punctuation. Email addresses are ok. Your user id must be at least 8 characters long.

Your password must be at least 8 characters long.

[\[brochure page about selecting passwords\]](#)

Provide all the information requested on the screen. Several fields are required, such as: First, Middle & Last Name, Email address, Home Address, City, State, Zip, and Phone Number, and Date of Birth.

(Note: Do not click the back button or your registration will be lost.)

Click **Continue** to proceed.

If you do not have an email address, consider obtaining a free email account at mail.yahoo.com, or any other free service. This is necessary for your VIRTUS Coordinator to communicate with you. If you cannot obtain an email address, enter:

noaddress@virtus.org



Please provide the information requested below

DO NOT CLICK THE BACK BUTTON OR YOUR REGISTRATION WILL BE LOST

Salutation:

First Name:

Full Middle Name:

Last Name:

Email:

Home Address:

Home Address Cont'd:

City:

State:

ZIP:

Daytime Phone:

Ext:

Evening Phone:

Date of Birth: why?

Registration Instructions Diocese of Altoona-Johnstown

Select the **PRIMARY** location where you work or volunteer by clicking the downward arrow and highlighting the location.

*Click **Continue to proceed.***

Note: If you serve at multiple diocesan locations, you will be prompted to select those additional locations in future screen(s).)

Please select the primary location where you work or volunteer.

Do not select the location of your training session
(unless it falls into one of the categories above)

Primary location:

If you are associated with multiple locations, please choose the primary (work) location first. Then click the continue button to select additional locations such as those where you volunteer.

Your selected location(s) are displayed on the screen.

Select **YES**, if you need to add secondary/additional locations. (Follow instructions in previous step to select additional locations.)

Otherwise, if your list of locations is complete, select **NO**.

This is the list of locations with which you are associated:

All Saints Catholic School (Cresson)

Do you work or volunteer in another location?

Select the role(s) that you serve within your parish. Please check **all** roles that apply.

Additionally, **enter** your title in the box provided that best describes your role within the Diocese -- ie. Catechist, Coach, DRE, Eucharistic Minister, Math Teacher, Room Mom, Seminarian, etc.

*Click **Continue to proceed.***

Please select the roles that you play within your diocese

Please check all that apply. You must select at least one role.

<input type="checkbox"/> Candidate for ordination <small>All individuals who are choosing for ordination as a priest for the diocese.</small>	<input type="checkbox"/> Employee <small>Full employees of a parish in the diocese.</small>
<input type="checkbox"/> Deacon <small>Ordained permanent Deacons.</small>	<input type="checkbox"/> Priest
<input type="checkbox"/> Educator <small>Paid Teacher in Catholic School System.</small>	<input type="checkbox"/> Volunteer <small>Any person who is not clergy and is not working a salary for ministry performed in a parish in the diocese.</small>

If you have a title within your diocese please enter it below.
If you do not have a title, please briefly describe what you do for the diocese.

Title or Diocesan function:

Please answer the questions presented.

*Click **Continue to proceed.***

Are you a parent or guardian of a child under 18?

Yes
 No

Do you interact with, work with or come into contact with minors and/or vulnerable adults of this archdiocese/diocese/religious organization?

Yes
 No

Do you manage, supervise or oversee employees or volunteers on behalf of this archdiocese/diocese/religious organization in any capacity?

Yes
 No


Registration Instructions Diocese of Altoona-Johnstown

Please review the following and respond to each of the following documents.

[Diocese of Altoona-Johnstown Policies for Youth Protection](#)

To proceed, please enter your full name and today's date, and **Confirm** by clicking on: "I've downloaded, read, and understand the Diocese of Altoona-Johnstown Policies for Youth Protection."

Diocese of Altoona-Johnstown, PA
Policies for Youth Protection



Policies for Youth Protection

I hereby acknowledge that I have downloaded, read, and understand the attached document for the Policies for Youth Protection.

Please provide an electronic acknowledgement to confirm you have received the document above.

Full Name (first, middle and last)*: (John D. Smith)

Today's Date*: (mm/dd/yyyy)

If you have **not** attended a **VIRTUS Protecting God's Children Online Session**, choose **NO**.

Otherwise, choose **YES**.

Have you already attended a VIRTUS Protecting God's Children Session?

Click inside the circle to select the **Protecting God's Children Instructor-led or Online Training** you wish to complete.

[Click Complete Registration to proceed.](#)

Please select the session you wish to attend

- Protecting God's Children for Adults**
 - Where:** St Thomas School (Bedford)
129 West Penn St
 - When:** Saturday, April 7, 2018
9:00 AM
 - Estimated length of session:** 4 hrs 30 min
 - Spaces remaining:** 43 of 50
 - Language:** This session will be conducted in English
 - Notes:** Youth Protection 9 am-10:15 am Mandated Reporting 10:30 am-1:30 pm
 - Wheelchair accessible:** Yes
 - Contact:** Cindy O'Conner ((814) 695-5579 Ext 2621)
- Protecting God's Children for Adults (Online Training)**
- Protecting God's Children for Adults (Online Training in Spanish)**

Click on **Begin National Background Check** to be directed to the Selection.com background check secure website, if required to complete a background check.

NOTE: *This national check **DOES NOT** replace a Pennsylvania Criminal, a Pennsylvania Child Abuse clearance check or the FBI fingerprint check.*

Thank you for registering with VIRTUS Online.

Thank you for registering for a Protecting God's Children session and with VIRTUS Online. You will receive an email confirming your registration for the session you selected.

After you attend your session, your account request will be reviewed by your Coordinator.

Your registration is not complete

You must complete a background check

As part of our efforts to create and maintain a safe environment for the children and volunteers of our diocese, we have chosen Selection.com® to do all our background checks.

By clicking this button, you will be directed to their secure website called **Faithx™**.

You will be notified via email when your VIRTUS Online account is activated.

Registration Instructions Diocese of Altoona-Johnstown

You are now within the **secure website** of **FASTRAX®**. Please click on **Enter Background Check Info** to proceed.

Please complete the following steps within the national background check process, which includes reviewing the inquiry release, entering applicant information, a final review, and the submission of the background check.

NOTE: This national check **DOES NOT** replace a **Pennsylvania Criminal, a Pennsylvania Child Abuse clearance check or the FBI fingerprint check**

If you registered for **online training**, you will be automatically taken to the online training course, after you complete and close the Fastrax screen.



Please read the Fair Credit Reporting Act and then click on **'I Agree'** to continue.



Enter the necessary fields referenced in red that have not yet been populated.

Scroll down to proceed.

Registration Instructions Diocese of Altoona-Johnstown

Each applicant is asked if they would like to cover the fee for this national check as an option and donation:

The cost of my **national** background check **which does not replace any other CPSL clearances**, is necessary as part of my application and commitment to serve as a volunteer with at my parish, school or diocese program under the Diocese of Altoona-Johnstown, is \$10.

I AGREE to contribute this amount as part of my charitable giving commitment in support of my parish, school or organization.

I DO NOT AGREE to contribute this amount as part of my charitable giving commitment in support of my parish, school or organization. Please charge my parish, school or organization (primary location).

NOTE: This national check DOES NOT replace a Pennsylvania Criminal, a Pennsylvania Child Abuse clearance check or the FBI fingerprint check

Click **Next** to proceed.

NOTES
Please enter any other information that will help us verify your check.
(For example, if you have other accounts, licenses, etc.)

PAYMENT OPTION
The cost of my background check, which is a necessary part of my application to work as a volunteer or employee with the Diocese of Altoona-Johnstown, is \$10.
 I AGREE to contribute this amount as part of my charitable giving commitment in support of my parish, school or organization.
 I DO NOT AGREE to contribute this amount as part of my charitable giving commitment in support of my parish, school or organization. Please charge my parish, school or organization.

CREDIT CARD INFORMATION
 First Name on Card: _____ Last Name on Card: _____
 Card Number: _____
 Expiration Date: _____
 Use personal address as billing address

Next

Review and sign the release by entering your first initial and last name, such as JDoe, and enter the last four digits of your social security number.

Click **Next** to proceed.

RELEASE FORM INFORMATION
PERMANENT EMPLOYMENT INQUIRY RELEASE
 In connection with my application for employment (including contract and/or volunteer services) with you, I understand that you intend to rely on SELECTON.COM to obtain Customer Reports and/or Investigative Consumer Reports (collectively defined in the below Fair Credit Reporting Act (FCRA) Terms Report) that may include information concerning my academic background, financial, criminal, credit records, credit standing, creditworthiness, general reputation, history of living, personal information, reasons for work termination, work absence terms, work habits and/or work performance. You may also seek information concerning my civil litigation history, criminal record, occupational background, employment history, travel while records, and/or worker's compensation history.

I understand that you may rely on the information contained in these Reports in determining whether to extend an offer of employment to me or to renew my employment with you. If you complete hiring or a future employment related decision that will affect me based, in whole or in part, upon a Report obtained from SELECTON.COM, I will receive a copy of the Report and a written summary of my Consumer Rights under the FCRA before you finalize this decision.

I have read the above disclosure and I hereby authorize you, SELECTON.COM or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, former and current employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. This authorization shall remain in full force and effect for the duration of my employment with you. I shall make an ongoing authorization for you to obtain Reports about me from SELECTON.COM, in perpetuity, or for as long as this authorization shall be in effect as the original. I agree that any and all disputes arising from any Report that is brought on-line or made available in Hard Copy, shall be governed by, and construed in accordance with, the laws of the State of Ohio.

Signature
 I understand the terms, consequences and consequences of this release and I agree to sign this release and I agree to sign this release and I agree to sign this release.

Signature: (The Name Here, The y)

 Date: _____
 Example: 1999

Next

Review your information provided, and please note that you can go 'Back' as needed.

You can request a copy of your background check by checking the box and providing an email address.

*Click **Submit Request**.*

The screenshot shows a registration form with the following sections:

- Applicant Information:** Includes fields for Name, Address, City, State, Zip, and Phone.
- Request for Background Check:** A section with a checkbox and text asking if the user wants a copy of their background check. It includes instructions on how to provide an email address for the check.
- Submit Request:** A red button at the bottom right.

Review that your request has been submitted.

You can now **close** this screen.

The screenshot shows a confirmation screen from Fastrax with the following details:

- Message:** YOUR REQUEST HAS BEEN SUCCESSFULLY SUBMITTED.
- Thank you:** Your request has been received.
- Company Information:**
 - Company Name: Fastrax Credit Card Provider
 - Address: 17700
 - City: Altoona, PA 15201
 - Phone: 800-325-3609
 - Transmit Date: 08/08/2018 10:01 PM
- Close:** A blue button at the bottom left.

Your session has ended within Fastrax.

The screenshot shows a 'Session Ended' message from Fastrax with a red background and the text: 'Thank you! Your request has been received.'

If you selected the **online training**, please click on the green circle to begin the Online Training

Upon completion, the last screen will allow you to print a certificate, and you will always have the ability to log back into your account and access the certificate.

Online Training Courses

To begin your online training, please click the title of your assigned training:

- Protecting God's Children® Online Awareness Session 3.0**
Assigned: 08/08/2018
Due: 08/20/2018

To contact the background check provider, **Selection.com**, please contact their helpdesk at **800-325-3609**.

If you have additional questions about **VIRTUS Online training**, please contact the **VIRTUS Help Desk** at **888-847-8870**.

Thank you!

